PART B - FEE(S) TRANSMITTAL

oplete and stand this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Pate

Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

\4	,199/									
INSTRUCTIONS: This appropriate All formation indicated i	form should be used correspondence including the below or directed of tions.	for transmitting the ng the Patent, advan nerwise in Block 1,	ISSUE FEE and PUBL ice orders and notification by (a) specifying a new	ICATI on of n corres	ON FEE (if requirements of the contract of the	red). Bl rill be m and/or	locks 1 through 5 shailed to the current (b) indicating a separate	hould be correspo arate "FE	completed where ndence address as E ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
26890	7590 02/22									
JAMES M. STOVER					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United					
TERADATA CORPORATION					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
2835 MIAMI VILLAGE DRIVE					smitted to the USPT	ro (571)) 273-2885, on the d	ate indica	ited below.	
MIAMISBURG			Mich	wk	6 cora	ر م	(Depositor's name)			
					Mil	uLL	J. Hil	~	(Signature)	
					7,43	5-	15-18		(Date)	
APPLICATION NO.	LICATION NO. FILING DATE		FIRST NAMED INVI	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.		
09/943.708	09/943,708 08/31/2001			John D. Frazier			9378 2194			
<u>-</u>		ACTION THROUG	H CUSTOMER IDENTI		ION AND SERVIC	CE-TIM	E MEASUREMEN	Γ		
					05/20/	'2008 E	AREGAY2 0000082	5 504370	09943708	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE	DUE	PREV. PAIQ ISSUE FEE		TOTAĻŦĒĒ(Š)ĴDŪĒ		DATE DUE	
nonprovisional	NO	\$1440	\$0		\$0		\$1440		05/22/2008	
EXAMINER		ART UNIT	CLASS-SUBCLA	SS						
ZURITA, JAMES H 3625			705-026000							
Change of correspond		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys								
CFR 1.363). Change of corresp Address form PTO/SI	or agents OR, al	or agents OR, alternatively,								
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	registered attorn 2 registered pate	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED	ON THE PATENT (prin	t or typ	ne)					
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Teradata US, Inc. Mismisburg 10H										
Please check the appropr	iate assignee category or	categories (will not	be printed on the patent)	: 🗆	Individual Co	rporatio	n or other private gro	oup entity	Government	
a. The following fee(s)	are submitted:		4b. Payment of Fee(s)	•	se first reapply an	y previ	ously paid issue fee	shown at	oove)	
Issue Fee			A check is encl							
Publication Fee (N	Payment by cre	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-4370 (enclose an extra copy of this form).								
Advance Order -	# of Copies		overpayment, to	Depo:	sit Account Number	50:	-4370 (enclose a	n extra co	opy of this form).	
	tus (from status indicate s SMALL ENTITY state		☐ b. Applicant is	no long	ger claiming SMAL	L ENT	ITY status. See 37 C	FR 1.27(g	g)(2).	
NOTE: The Issue Fee an nterest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be acc tes Patent and Trade	cepted from anyone other mark Office.	than tl	ne applicant; a regis	stered at	torney or agent; or th	ie assigne	e or other party in	
Authorized Signature	Jan	a=			Date	W	ب ۱4, 20	o &		
Typed or printed nam	· JAMES	M. S.	Jer		Registration No	o	32,759			
This collection of inform	ation is required by 37 C	CFR 1.311. The infor	mation is required to obta	ain or r	etain a benefit by th	ne public	c which is to file (and to complete, including	I by the U	JSPTO to process)	

an approximate Confidencially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.